

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000114453

**Entity Name:** DUFAYDIFFAY LLC

**Current Principal Place of Business:**

7901 4TH ST N  
STE 8315  
ST. PETERSBURG, FL 33702

**Current Mailing Address:**

P O BOX 30565  
3330 FAIRCHILD GARDENS AVE  
PALM BEACH GARDENS, FL 33420 US

**FEI Number:** 92-2934407

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

NORTHWEST REGISTERED AGENT LLC  
7901 4TH ST N  
STE 300  
ST. PETERSBURG, FL 33702 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGR  
Name NOBLE ATELIER LLC  
Address 7901 4TH ST N STE 8180  
City-State-Zip: ST PETERSBURG FL 33702

Title AMBR  
Name MCGHEE, TROY  
Address 3330 FAIRCHILD GARDENS AVE UNIT  
30565  
City-State-Zip: PALM BCH GARDENS FL 33410

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** TROY MCGHEE

AMBR

04/24/2024

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date